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**D350-689-041**  
**Job Sheet 198606**



**Part No:** D350-689-041

**Job Qty:** 1 pcs

**Part Name:** Dual High Back Seat Assembly



**Part Weight:** 0 lbs

**Status:** New

**Priority:** Medium

**Job Created:** 7/31/19

**Job Tracking No:**

**Created By:** Marie Lajeunesse

**Due Date:** 8/22/19

**Description:** ORDER 18344

**Type:** SOLD

**Note:** DWG REV C SHEET 17 IPP Rev:H Removed Sub-Parts 06-02-09 JLM IPP Rev:I As per NCR 070 06-09-06  
JLM IPP Rev:J as per DSI 9498 DD 10.02.12 verified by:JLM IPP REV:K 15.02.12 AS PER IIN REV:C DD  
VERF:JLM

**Ship Via:**

### Bill of Materials

### Job Routing

| Op<br>No | Operation                   | Qty   | Start Date | Due<br>Date | Standard     |            | Workcenter/Supplier   |           | Sign-off                      |
|----------|-----------------------------|-------|------------|-------------|--------------|------------|-----------------------|-----------|-------------------------------|
|          |                             |       |            |             | Setup<br>Hrs | Run<br>Hrs | Workcenter / Supplier | Lead Time |                               |
| 140      | Small Fab - 1               | 1 pcs | 8/22/19    |             | 0.00         | 1.11       | Small Fab - 1         |           | Sma<br>19/9/19                |
|          |                             |       |            |             |              |            | Small Fab - 2         |           |                               |
|          |                             |       |            |             |              |            | Small Fab - 3         |           |                               |
|          |                             |       |            |             |              |            | Small Fab - 4         |           |                               |
|          |                             |       |            |             |              |            | Small Fab - 5         |           |                               |
|          |                             |       |            |             |              |            | Small Fab - 6         |           |                               |
|          |                             |       |            |             |              |            | Small Fab - 7         |           |                               |
|          |                             |       |            |             |              |            | Small Fab - 8         |           |                               |
| 150      | QC 5                        | 1 pcs | 8/22/19    |             | 0.00         | 0.00       | QC 5 - 10             |           | DAS<br>49<br>SEP 04 2019 0:00 |
|          |                             |       |            |             |              |            | QC 5 - 12             |           |                               |
|          |                             |       |            |             |              |            | QC 5 - 17             |           |                               |
|          |                             |       |            |             |              |            | QC 5 - 18             |           |                               |
|          |                             |       |            |             |              |            | QC 5 - 19             |           |                               |
|          |                             |       |            |             |              |            | QC 5 - 22             |           |                               |
|          |                             |       |            |             |              |            | QC 5 - 24             |           |                               |
|          |                             |       |            |             |              |            | QC 5 - 3              |           |                               |
|          |                             |       |            |             |              |            | QC 5 - 43             |           |                               |
|          |                             |       |            |             |              |            | QC 5 - 49             |           |                               |
|          |                             |       |            |             |              |            | QC 5 - 51             |           |                               |
|          |                             |       |            |             |              |            | QC 5 - 58             |           |                               |
|          |                             |       |            |             |              |            | QC 5 - 68             |           |                               |
|          |                             |       |            |             |              |            | QC 5 - 9              |           |                               |
|          |                             |       |            |             |              |            | QC 5 - 50             |           |                               |
|          |                             |       |            |             |              |            | QC 5 - 30             |           |                               |
|          |                             |       |            |             |              |            | QC 5 - 40             |           |                               |
|          |                             |       |            |             |              |            | QC 5 - 61             |           |                               |
|          |                             |       |            |             |              |            | QC 5 - 81             |           |                               |
| 160      | Packaging 3-1 - Stock - B4B | 1 pcs | 8/22/19    |             | 0.00         | 0.00       | Packaging 3 - 1 - B4B |           |                               |
|          |                             |       |            |             |              |            | Packaging 3 - 2 - B4B |           |                               |
|          |                             |       |            |             |              |            | Packaging 3 - 3 - B4B |           |                               |

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|                  |       |         |           |                        |             |
|------------------|-------|---------|-----------|------------------------|-------------|
|                  |       |         |           | Packaging 3 - 4 - B4B  |             |
|                  |       |         |           | Packaging 3 - 5 - B4B  |             |
|                  |       |         |           | Packaging 3 - 6 - B4B  | DAS         |
|                  |       |         |           | Packaging 3 - 7 - B4B  | 28          |
|                  |       |         |           | Packaging 3 - 8 - B4B  | 9-89        |
|                  |       |         |           | Packaging 3 - 9 - B4B  |             |
|                  |       |         |           | Packaging 3 - 10 - B4B |             |
|                  |       |         |           | Packaging 3 - 11 - B4B |             |
|                  |       |         |           | Packaging 3 - 12 - B4B |             |
|                  |       |         |           | Packaging 3 - 13 - B4B |             |
|                  |       |         |           | Packaging 3 - 14 - B4B |             |
|                  |       |         |           | Packaging 3 - 15 - B4B |             |
|                  |       |         |           | Packaging 3 - 16 - B4B |             |
|                  |       |         |           | Packaging 3 - 17 - B4B |             |
|                  |       |         |           | Packaging 3 - 18 - B4B |             |
|                  |       |         |           | Packaging 3 - 19 - B4B |             |
|                  |       |         |           | Packaging 3 - 20 - B4B |             |
|                  |       |         |           | Packaging 3 - 21 - B4B |             |
|                  |       |         |           | Packaging 3 - 22 - B4B |             |
|                  |       |         |           | Packaging 3 - 23 - B4B |             |
|                  |       |         |           | Packaging 3 - 24 - B4B |             |
|                  |       |         |           | Packaging 3 - 25 - B4B |             |
|                  |       |         |           | Packaging 3 - 26 - B4B |             |
|                  |       |         |           | Packaging 3 - 27 - B4B |             |
|                  |       |         |           | Packaging 3 - 28 - B4B |             |
|                  |       |         |           | Packaging 3 - 29 - B4B |             |
|                  |       |         |           | Packaging 3 - 30 - B4B |             |
|                  |       |         |           | Packaging 3 - 31 - B4B |             |
|                  |       |         |           | Packaging 3 - 32 - B4B |             |
|                  |       |         |           | Packaging 3 - 33 - B4B |             |
|                  |       |         |           | Packaging 3 - 34 - B4B |             |
|                  |       |         |           | Packaging 3 - 35 - B4B |             |
|                  |       |         |           | Packaging 3 - 36 - B4B |             |
| 165 DC - 1 - B4B | 1 pcs | 8/22/19 | 0.00 0.00 | DC - 1 - B4B           | SEP 09 2019 |
|                  |       |         |           | DC - 2 - B4B           |             |
| 170 QC 21 - FG   | 1 pcs | 8/22/19 | 0.00 0.00 | QC 21 - FG - 21        |             |
|                  |       |         |           | QC 21 - FG - 70        |             |
|                  |       |         |           | QC 21 - SA - 53        |             |

Part Op 140 - ASSEMBLE STUD, SPRING AND LOCK AS PER IIN SHEET 17

Descriptions: 150 - (QC5- Inspect part completeness to step on W/O)

160 - (Identify as per dwg &amp; Stock Location: \_\_\_\_\_), Identify and pack for shipping as per PPP D350-689-041

165 - Photocopy bluefiles and create labels as per PPP D350-689-041 CHG003

170 - (QC21- Final Inspection - Work Order Release)

## Job BOM

| Part / Item | Component Name          | Quantity     | Operation         | Container |
|-------------|-------------------------|--------------|-------------------|-----------|
| D3028-1     | Stud                    | 4 pcs (4 ea) | 140-Small Fab - 1 | 5152247   |
| D3029-1     | Spring                  | 2 pcs (2 ea) | 140-Small Fab - 1 | 7151293   |
| D3030-1     | Lock                    | 2 pcs (2 ea) | 140-Small Fab - 1 | 3149113   |
| D5162-041   | Seat Structure Assembly | 1 pcs (1 ea) | 140-Small Fab - 1 | 5209624   |

## Job Allocations

| Operation         | Component Part | Required | Inventory | Allocated |
|-------------------|----------------|----------|-----------|-----------|
| 140-Small Fab - 1 | D3028-1        | 4        | 14        | 0         |
|                   | D3029-1        | 2        | 6         | 0         |
|                   | D3030-1        | 2        | 8         | 0         |
|                   | D5162-041      | 1        | 0         | 0         |

| Part Specifications                |
|------------------------------------|
| Specifications could not be found. |

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Entered:

Date:

## WORK ORDER NON-CONFORMANCE / ROUTE UPDATE

NCR No.

Route update only



|                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                        |  |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                           |  |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                              |  |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     |  |  |  |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                    |  |  |  |
|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--|--|--|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--|--|--|
| Job: _____<br>Part No. _____                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                           |  | <b>DISPOSITION</b><br>Rework <input type="checkbox"/> <input type="checkbox"/><br>Scrap <input type="checkbox"/> <input type="checkbox"/><br>Use-as-is <input type="checkbox"/> <input type="checkbox"/>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                  |  | <b>DEPARTMENT/PROCESS</b><br>Skid-tube <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/><br>Machining <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/><br>Large Fab <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/><br>Cross tube <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/><br>Small Fab <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/><br>Finishing <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/><br>Eng. (Non-AW) <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/><br>Prod. Eng. Coord. <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/><br>Rec/Store/Packaging <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/><br>Engineering <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/><br>Water Jet <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/><br>Supplier <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/><br>Quality <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> |  | Date : _____<br>Sequence #: _____<br>QTY Affected : _____<br>MRB (QSI042) _____                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     |  |  |  |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                    |  |  |  |
| Description Work Order Deviation                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                       |  | Disposition                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                               |  | Completed By                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                 |  |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     |  |  |  |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                    |  |  |  |
| Root Cause                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                             |  | Lead hand / Supervisor                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                    |  |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                              |  |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     |  |  |  |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                    |  |  |  |
| QC / QA Coordinator                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                    |  | Fault Category                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                            |  |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                              |  |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     |  |  |  |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                    |  |  |  |
| Operator <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/><br>Manufacturing Process <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/><br>Equip/Tooling <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/><br>Handling/Preservation <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/><br>Material <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/><br>Product Improvement <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/><br>Process Improvement <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/><br>Human Factors <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> |  | Contamination <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/><br>Misaligned/off center <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/><br>BOM/Route <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/><br>Broken/Damage/Defect <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/><br>Incomplete/Unclear Instructions <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/><br>Drill Holes <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/><br>Fit/Function <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> |  |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                              |  | Power Loss/Surge <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/><br>Folio/Program <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/><br>Grain Direction <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/><br>Weld <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/><br>Wrong Stock Pulled <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/><br>Out of Sequence <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/><br>Off-set/Set-up <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> |  |  |  | Positioned Wrong <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/><br>Outside Tolerance <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/><br>Drawing <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/><br>Finish <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/><br>Part Lost/Missing <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/><br>Misread <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> |  |  |  |
| Other/Details:                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                         |  | Other/Details:                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                            |  |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                              |  |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     |  |  |  |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                    |  |  |  |